# FORM D REGEIVED OCT 29 1907

UNITED STATES

SECURITIES AND EXCHANGE COMMIS

Washington, D.C. 20549

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6) AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

0880	OMB APPROVAL					
	OMB NUMBER: Expires: Estimated average hours per response					

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	Date Received					
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Name of officing ( check if this i	s an amendment and name has changed, and indicate change	2.)		
Filing Under (Check box(es) that apply Type of Filing: New Filing	): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ ☐ Amendment	Section 4(6) ULOE		
	A. BASIC IDENTIFICATION DATA			
1. Enter the information requested abo	ut the issuer			
Name of Issuer (  Check if this is an High Street Real Estate Fund III-B, 1	n amendment and name has changed, and indicate change.)			
Address of Executive Offices 265 Franklin Street, 3 <sup>rd</sup> Floor, Boston	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) 617/737-5200		
Address of Principal Business Operatio (if different from Executive Offices) n/a	PROCESSED	Telephone Number (Including Area Code)		
Brief Description of Business	INUV II I 2002			
Real estate investment.	THUWSON FINANCIAL			
Type of Business Organization		07081778		
<ul><li>□ corporation</li><li>□ business trust</li></ul>	<ul> <li>☑ limited partnership, already formed</li> <li>☐ limited partnership, to be formed</li> </ul>	other (p)		
Actual or Estimated Date of Incorporat Jurisdiction of Incorporation or Organia	1 0	ear 7  Mactual □ Estimated  r State:  D E		
GENERAL INSTRUCTIONS	<del></del>			

### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
   Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Coughlin, Daniel J.					
Business or Residence Address	(Numb	er and Street, City, State, Z	ip Code)		
265 Franklin Street, Boston, MA	02110				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, if ind	lividual)				Managing Partner
Killian, John T.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		
265 Franklin Street, Boston, MA	02110				
200 1 141111111 011000, 200001, 11111					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Tiffany, Carolyn B.					
Business or Residence Address	(Numb	er and Street, City, State, 2	ip Code)		
265 Franklin Street, Boston, MA	02110				
Check Box(es) that Apply:	□ Promoter	□ Beneficial Owner	■ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				Triumgurg Furtific
Chagares, Robert L.					
Business or Residence Address	(Numb	er and Street, City, State, Z	(ip Code)		
265 Emplier Street Destan MA	•	, ,	. ,		
265 Franklin Street, Boston, MA Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or
					Managing Partner
Full Name (Last name first, if ind	lividual)				
High Street Real Estate Fund III	GP, LLC				
Business or Residence Address	(Numb	er and Street, City, State, 2	ip Code)		
265 Franklin Street, Boston, MA	02110				
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Sweder & Ross LLP Retirement I	Plan				
Business or Residence Address		er and Street, City, State, 2	ip Code)		<del></del>
c/o Michael S. Ross, Trustee, 21	Custom House Stre	et. Suite 300. Boston. MA	02110		
Check Box(es) that Apply:	□ Promoter	Beneficial Owner     ■	☐ Executive Officer	□ Director	☐ General and/or
Full Name (Last name first, if ind	lividual)				Managing Partner
,	ŕ				
Wolk Family Investment Partners Business or Residence Address	-	er and Street, City, State, Z	ip Code)		
	·	•	•		
c/o The Cross Country Group, Or	ie Cabot Road, 4 <sup>m</sup>	Floor, Medford, MA 0215	<u> </u>		

Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	ndividual)		-		
Wallace Family Management,	LLC				
Business or Residence Address	(Numb	er and Street, City, State, Z	Lip Code)		

21 Farm Street, Dover, MA 02030

				B. INF	ORMATIC	ON ABOU	r offeri	NG		•		
1. Has the is:	suer sold, o	r does the is	ssuer intend	to sell, to	non accredi	ted investor	rs in this of	fering?			Yes D	No ⊠
			Ans	wer also in	Appendix,	Column 2,	if filing un	der ULOE.				
2. What is th	e minimum	investmen	t that will h	e accented	from any in	dividual?					\$ 25.0	)00*
		Subject to t		<del>-</del>	<del>-</del>						Yes	No
3. Does the o	ffering per	mit joint ov	vnership of	a single un	it?						8	
4. Enter the irremuneration agent of a bropersons to be Full Name (L	for solicita oker or deal listed are a ast name fi	tion of pure er registered ssociated per rst, if indivi	chasers in co d with the S ersons of su idual)	onnection v EC and/or ich a broke	vith sales of with a state r or dealer, y	securities or states, l you may se	in the offeri	ng. If a per of the brol	rson to be li cer or deale	isted is an . r. If more	associate than fiv	ed person or re (5)
Business or R	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asse	ociated Bro	ker or Deal	er									
States in Whi					Solicit Purc						All Sta	
(Cneck .	[AK]	[AZ]	(AR)	[CA]	[CO]	[CT]	[DE]	[DC]	FL}	[GA]	, жи зіа [HI]	
	[IN]	[A]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[נא]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
[RI]	[SC]	(SD)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	ίΜIJ	[WY]	
n/a Business or R				treet, City,	State, Zip C	Code)						
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi					Solicit Purc	hasers						
(Check ". [AL]	All States" [AK]	or check ind [AZ]	dividual Sta [AR]	ites) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]		All Sta [H1]	
(1.2] [IL]	[IN]	[JA]	[KS]	[KY]	(LA)	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	(NE)	[NV]	[NH]	[אן]	(NM)	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	• •
[RI]	[SC]	[SD]	[TN]	[TX]	[עד]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	
Full Name (L								<del></del>				
n/a												
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)		-				
						•						
Name of Asso	ciated Bro	ker or Deal	er									
States in Whi											A 11 C4	
(Check ". [AL]	All States" [AK]	or check ind [AZ]	dividual Sta [AR]	ites) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	□ [GA]	All Sta [H1]	
(KL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
(RI)	[SC]	(SD)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	(WI)	[WY]	

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	<b>\$</b>
	Equity	\$	s
	□ Common □ Preferred		
	Convertible Securities (including warrants)	<b>\$</b>	s
	Partnership Interests	\$_450,000,000	\$ <u>1.525.000</u>
	Other (Specify)	s	s
	Total	\$ 450,000,000	
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	_10	\$ <u>1.525.000</u>
	Non-accredited Investors		<b>s</b>
			_
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of	Dollar Amoun
	Rule 505	Security	\$
	Regulation A		s
	Rule 504		s
	Total		s
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		s
	Legal Fees		\$ <u>50,000</u>
	Accounting Fees		s
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify) Blue Sky Filing Fees		\$ <u>1.000</u>
	Total		\$_51,000

C. OFFERING PRICE	HOWRER OF INVESTORS, EXPENSES WAD OSE	OF I	CLEEDO				
1 and total expenses furnished in response	e offering price given in response to Part C - Question to Part C - Question 4.a. This difference is the			:	<u>\$ 449,949,000</u>		
used for each of the purposes shown. If the a	oss proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an stimate. The total of the payments listed must equal orth in response to Part C - Question 4.b above.						
in adjusted grows provided to the section of			Payments to Officers, Directors, & Affiliates		Payments To Others		
Salaries and fees			\$		<b>\$</b>		
Purchase of real estate		-	<u> </u>				
Purchase, rental or leasing and installation	n of machinery and equipment		\$ \$				
Construction or leasing of plant building	Construction or leasing of plant buildings and facilities						
Acquisition of other businesses (including	g the value of securities involved in this						
offering that may be used in exchange for issuer pursuant to a merger)	r the assets or securities of another		<b>s</b>	0	<b>S</b>		
Repayment of indebtedness		\$	0	S			
			\$	0	s		
· -	n real estate	0	\$	*	<u>\$449.949,000</u>		
			<b>s</b>				
Column Totals			<b>s</b>	8	\$449,949,000		
Total Payments Listed (Column totals ac	kled)		⊠ \$ <u>4</u>	49	<u>,949</u> ,000		
	D. FEDERAL SIGNATURE		-		·		
following signature constitutes an undertakin	ned by the undersigned duly authorized person. If this not by the issuer to furnish to the U.S. Securities and Excha issuer to any non-accredited investor pursuant to paragraph	nge C	commission, up	e 50 on v	5, the vritten request		
Issuer (Print or Type)	Signature		Date				
High Street Real Estate Fund III-B, L.P.	By: High Street Real Estate Fund III GP, LLC		October 1, 20	007			
			l				
Name of Signer (Print or Type)	Mile of Signey (Print or Type)						
Carolyn B. Tiffany	Chief Operating Officer and Treasurer				- <del></del>		

– ATTENTION –

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			
Is any party described in 17 CFR 230.262 p     of such rule?N/A	resently subject to any of the disqualification provisions		Yes 🖸	No
	See Appendix, Column 5, for state response.			
<ol><li>The undersigned issuer hereby undertakes to Form D (17 CFR 239.500) at such times as</li></ol>	o furnish to any state administrator of any state in which this required by state law. N/A	notice is filed a notice o	on	
<ol> <li>The undersigned issuer hereby undertakes to issuer to offerees. N/A</li> </ol>	o furnish to the state administrators, upon written request, in	formation furnished by (	ihe	
limited Offering Exemption (ULOE) of the	ssuer is familiar with the conditions that must be satisfied to e state in which this notice is filed and understands that the i shing that these conditions have been satisfied. N/A	be entitled to the Unifor issuer claiming the availa	m ability	
The issuer has read this notification and knows undersigned duly authorized person.	the contents to be true and has duly caused this notice to be	e signed on its behalf by	the	
Issuer (Print or Type)	Signature	Date		
High Street Real Estate Fund III-B, L.P.	By: High Street Real Estate Fund III GP, LLC By:	October 2007		
Name of Signer (Print or Type)	Title of Signer (Patht or Type)	<u>.                                    </u>		

Chief Operating Officer and Treasurer

Note: Items 1, 2, 3 and 4 are not applicable pursuant to the National Securities Markets Improvement Act of 1996.

Carolyn B. Tiffany

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

l	Intendente Investo	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR				-						
CA								1.2		
со										
СТ										
DE										
DC										
FL		Х	\$450,000,000	1	\$150,000	0	0			
GA										
ні										
lD										
IL										
IN										
IA.	<u> </u>									
KS										
KY										
LA										
ME										
MD										
MA		х	\$450,000,000	8	\$1,275,000	0	0			
МІ										
MN										
MS										
мо										

# APPENDIX

1	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МТ										
NE										
NV										
NH				·						
NJ										
NM										
NY										
NC										
ND								— ·		
ОН										
ок						-				
OR										
PA					-				<del></del> -	
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA		Х	\$450,000,000	1	\$100,000	0	0			
WA										
wv										
WI										
WY										
PR 3114807										

